WILLOWBROOK NURSING & REHAB CENTER

901 MULBERRY ST

LAKE MILLS 53551	Phone: (920) 648-8344		Ownership:	Corporation
Operated from 1/1 To 12	/31 Days of Operation:	366	Highest Level License:	Skilled
Operate in Conjunction wi	th Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and	Staffed (12/31/04):	57	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capaci	ty (12/31/04):	57	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12	/31/04:	54	Average Daily Census:	54

Services Provided to Non-Residents	Age, Gender, and Primary Di	2/31/04)	Length of Stay (12/31/04)						
Home Health Care No		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	53.7		
Supp. Home Care-Personal Care	No					1 - 4 Years	31.5		
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	11.1	More Than 4 Years	14.8		
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	14.8				
Respite Care	No	Mental Illness (Other)	3.7	75 - 84	25.9		100.0		
Adult Day Care No		Alcohol & Other Drug Abuse 0.0   85 - 94 46.3   ***********************************				*******	******		
Adult Day Health Care No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	1.9	Full-Time Equivalent			
Congregate Meals No		Cancer	5.6	5.6		Nursing Staff per 100 Residents			
Home Delivered Meals No		Fractures	3.7	İ	100.0	(12/31/04)			
Other Meals	No	Cardiovascular	7.4	65 & Over	88.9				
Transportation	No	Cerebrovascular	1.9			RNs	8.8		
Referral Service	No	Diabetes	9.3	Gender	%	LPNs	12.4		
Other Services	Yes	Respiratory	5.6			Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	63.0	Male	31.5	Aides, & Orderlies	38.7		
Mentally Ill	No			Female	68.5				
Provide Day Programming for			100.0	İ					
Developmentally Disabled No				İ	100.0	İ			
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## Method of Reimbursement

		edicare			edicaid itle 19			Other			Private Pay	:		amily Care			Managed Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	1	5.0	206	4	17.4	137	1	50.0	167	0	0.0	0	0	0.0	0	0	0.0	0	6	11.1
Skilled Care	19	95.0	339	19	82.6	118	1	50.0	139	8	100.0	213	0	0.0	0	1	100.0	285	48	88.9
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	20	100.0		23	100.0		2	100.0		8	100.0		0	0.0		1	100.0		54	100.0

WILLOWBROOK NURSING & REHAB CENTER

Admissions, Discharges, and Deaths During Reporting Period						d Activities as of 12/ 	
3 11 1 3 1 11					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	9.1	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		83.3	16.7	54
Other Nursing Homes	0.0	Dressing	11.1		75.9	13.0	54
Acute Care Hospitals	86.4	Transferring	25.9		53.7	20.4	54
Psych. HospMR/DD Facilities	0.0	Toilet Use	22.2		50.0	27.8	54
Rehabilitation Hospitals	0.0	Eating	72.2		22.2	5.6	54
Other Locations	4.5	******	******	*****	* * * * * * * * * * * * * * * * * *	*******	******
Total Number of Admissions	132	Continence		%	Special Treatmen	ts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	14.8	Receiving Resp	iratory Care	7.4
Private Home/No Home Health	37.2	Occ/Freq. Incontiner	nt of Bladder	35.2	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	3.1	Occ/Freq. Incontiner	nt of Bowel	25.9	Receiving Suct	ioning	0.0
Other Nursing Homes	6.2				Receiving Osto	my Care	0.0
Acute Care Hospitals	11.6	Mobility			Receiving Tube	Feeding	3.7
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mech	anically Altered Diets	7.4
Rehabilitation Hospitals	0.0						
Other Locations	15.5	Skin Care			Other Resident C	haracteristics	
Deaths	26.4	With Pressure Sores		18.5	Have Advance D	irectives	25.9
Total Number of Discharges		With Rashes		7.4	Medications		
(Including Deaths)	129	İ			Receiving Psyc	hoactive Drugs	55.6

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Own	Ownership: Proprietary Peer Group % Ratio		Size:	Lic	ensure:				
	This	Pro			-99	Ski	lled	Al	1		
	Facility	Peer			Group	Peer Group		Faci	lities		
	%	%			Ratio	% F	Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	94.7	84.2	1.13	88.5	1.07	87.7	1.08	88.8	1.07		
Current Residents from In-County	85.2	76.9	1.11	72.5	1.17	70.1	1.21	77.4	1.10		
Admissions from In-County, Still Residing	20.5	19.0	1.07	19.6	1.04	21.3	0.96	19.4	1.05		
Admissions/Average Daily Census	244.4	161.6	1.51	144.1	1.70	116.7	2.09	146.5	1.67		
Discharges/Average Daily Census	238.9	161.5	1.48	142.5	1.68	117.9	2.03	148.0	1.61		
Discharges To Private Residence/Average Daily Census	96.3	70.9	1.36	59.0	1.63	49.0	1.97	66.9	1.44		
Residents Receiving Skilled Care	100	95.5	1.05	95.0	1.05	93.5	1.07	89.9	1.11		
Residents Aged 65 and Older	88.9	93.5	0.95	94.5	0.94	92.7	0.96	87.9	1.01		
Title 19 (Medicaid) Funded Residents	42.6	65.3	0.65	66.3	0.64	68.9	0.62	66.1	0.64		
Private Pay Funded Residents	14.8	18.2	0.81	20.8	0.71	19.5	0.76	20.6	0.72		
Developmentally Disabled Residents	0.0	0.5	0.00	0.4	0.00	0.5	0.00	6.0	0.00		
Mentally Ill Residents	3.7	28.5	0.13	32.3	0.11	36.0	0.10	33.6	0.11		
General Medical Service Residents	63.0	28.9	2.18	25.9	2.43	25.3	2.49	21.1	2.99		
Impaired ADL (Mean)	45.9	48.8	0.94	49.7	0.92	48.1	0.95	49.4	0.93		
Psychological Problems	55.6	59.8	0.93	60.4	0.92	61.7	0.90	57.7	0.96		
Nursing Care Required (Mean)	5.6	6.5	0.86	6.5	0.86	7.2	0.77	7.4	0.75		